

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|--------|---------|
| FEE DETERMINATION | <i>mr</i> | 67819 | 4/15/00 |
| O.I.P.E. CLASSIFIER | | 21 | 4/11/00 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | 61001 | 6/1/00 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------------|------|
| Final Original | |
| 126 | 16 |
| 1030 | 1228 |
| 5203 | 04 |
| 1 | ✓ |
| 2 | ✓ |
| 3 | ✓ |
| 4 | ✓ |
| 5 | ✓ |
| 6 | ✓ |
| 7 | ✓ |
| 8 | ✓ |
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| Claim | Date |
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| Final Original | |
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| Claim | Date |
|----------------|------|
| Final Original | |
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| 150 | |

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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